

Substitute for form 1449/PTO (Revised 07/2007)		Complete if Known	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(Use as many sheets as necessary)</i>		Application Number	10/573,212
		Filing Date	September 21, 2006
		First Named Inventor	Akira <i>et al.</i>
		Art Unit	1632
		Examiner Name	Hama, Joanne
Sheet	1	of	1
		Attorney Docket Number	051009/309226

## **OTHER DOCUMENTS**

Examiner Signature	/Joanne Hama/	Date Considered	05/06/2008
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\*Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.